

ORDER FOR SUPPLIES OR SERVICES										Page 1 Of 4	
<b>1. Contract/Purch Order/Agreement No.</b>  DAAE20-01-D-0107			<b>2. Delivery Order/Call No.</b>  0003		<b>3. Date Of Order/Call (YYYYMMDD)</b>  2002OCT17		<b>4. Requisition/Purch Request No.</b>  SEE SCHEDULE			<b>5. Priority</b>  DOA5	
<b>6. Issued By</b> TACOM-ROCK ISLAND AMSTA-LC-CSC-A CATHY MENDOZA (309)782-1258 ROCK ISLAND IL 61299-7630  EMAIL: MENDOZAC@RIA.ARMY.MIL				<b>Code</b> W52H09	<b>7. Administered By (If other than 6)</b> DCMA ATLANTA 805 WALKER STREET SUITE 1 MARIETTA GA 30060-2789				<b>Code</b> S1103A	<b>8. Delivery FOB</b>  <input checked="" type="checkbox"/> Destination <input type="checkbox"/> Other  (See Schedule if other)	
<b>9. Contractor</b>  F N MANUFACTURING INC 797 CLEMSON ROAD COLUMBIA SC 29229  Name and Address  TYPE BUSINESS: Large Business Performing in U.S.			<b>Code</b> 3S679	<b>Facility</b> 	<b>10. Deliver To FOB Point By (Date) (YYYYMMDD)</b>  SEE SCHEDULE			<b>11. X If Business Is</b> <input type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned			
<b>12. Discount Terms</b> 			<b>13. Mail Invoices To the Address in Block</b> See Block 15								
<b>14. Ship To</b> SEE SCHEDULE			<b>Code</b> 	<b>15. Payment Will Be Made By</b> DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264				<b>Code</b> HQ0338	<b>Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2</b>		
<b>16. Type of Order</b>	<b>Delivery/Call</b>	<input checked="" type="checkbox"/>	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.								
	<b>Purchase</b>		Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation, Dated _____, furnish the following on terms specified herein.								
			Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.								
Name Of Contractor			Signature			Typed Name And Title			Date Signed (YYYYMMDD)		
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:											
<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b> SEE SCHEDULE											
<b>18. Item No.</b>	<b>19. Schedule Of Supplies/Service</b> SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price			<b>20. Quantity Ordered/ Accepted*</b>	<b>21. Unit</b>	<b>22. Unit Price</b>	<b>23. Amount</b>				
	KIND OF CONTRACT: Supply Contracts and Priced Orders										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				<b>24. United States Of America</b>  /SIGNED/ By: SUZANNE K MCGREGOR /SIGNED/ MCGREGORS@RIA.ARMY.MIL (309)782-3127				<b>25. Total</b>	\$584,793.40		
<b>26. Quantity In Column 20 Has Been</b>  <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted  Date _____ Signature Of Authorized Govt Representative _____				<b>27. Ship. No.</b>  <input type="checkbox"/> Partial <input type="checkbox"/> Final	<b>28. D.O. Voucher No.</b>	<b>29. Differences</b>					
<b>30. Initials</b>				<b>31. Payment</b>  <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final	<b>32. Paid By</b>	<b>33. Amount Verified Correct For</b>					
<b>34. Check Number</b>				<b>35. Bill Of Lading No.</b>							
<b>36. I certify this account is correct and proper for payment</b>  Date _____ Signature And Title Of Certifying Officer _____	<b>37. Received At</b>	<b>38. Received By</b>	<b>39. Date Received</b>	<b>40. Total Containers</b>	<b>41. S/R Account Number</b>	<b>42. S/R Voucher No.</b>					

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-01-D-0107/0003 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 4
<b>Name of Offeror or Contractor:</b> F N MANUFACTURING INC		

SUPPLEMENTAL INFORMATION  
DELIVERY ORDER 0003 IS HEREBY AWARDED UNDER THE TERMS AND CONDITIONS OF CONTRACT DAAE20-01-D-0107.  
  
AWARD IS MADE FOR 1,748 EACH M249 BARREL MACHINE UNDER CLIN 0001AA.

\*\*\* END OF NARRATIVE A 001 \*\*\*

Name of Offeror or Contractor: F N MANUFACTURING INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	SUPPLIES OR SERVICES AND PRICES/COSTS  <u>Supplies or Services and Prices/Costs</u>  <u>PRODUCTION QUANTITY</u>  SECURITY CLASS: Unclassified  <u>Packaging and Marking</u>				
0001AA	<u>PRODUCTION QUANTITY WITHOUT FIRST ARTICLE/OV</u>  NSN: 1005-01-470-5046 NOUN: M249 BARREL MACHINE FSCM: 19200 PART NR: 12011986 SECURITY CLASS: Unclassified PRON: M131S014M1      PRON AMD: 01      ACRN: AA AMS CD: 0600116Z6ZA  <u>Packaging and Marking</u>  <u>Inspection and Acceptance</u> INSPECTION: Origin      ACCEPTANCE: Origin  <u>Deliveries or Performance</u> DOC				

**CONTINUATION SHEET**

Reference No. of Document Being Continued

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**PIIN/SIIN** DAAE20-01-D-0107/0003

**MOD/AMD**

**Name of Offeror or Contractor:** F N MANUFACTURING INC

## CONTRACT ADMINISTRATION DATA

										JOB			
LINE	PRON/	OBLG								ORDER	ACCOUNTING	OBLIGATED	
ITEM	AMS CD	ACRN	STAT	ACCOUNTING CLASSIFICATION						NUMBER	STATION	AMOUNT	
0001AA	M131S014M1	AA	2	97	X4930AC9G	6D		26KB	S11116		W52H09	\$	584,793.40
	0600116Z6ZA												
											TOTAL	\$	584,793.40

SERVICE							ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>	
Army	AA	97	X4930AC9G	6D	26KB	S11116	W52H09	\$ 584,793.40
							TOTAL	\$ 584,793.40